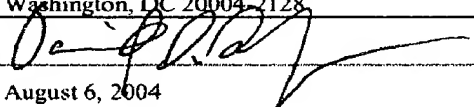


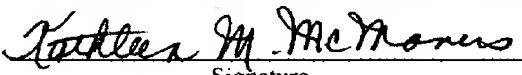
AUG 06 2004

OFFICIAL

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/817,797	
	Filing Date	March 27, 2001	
	First Named Inventor	Michael HERMANN	
	Group Art Unit	2872	
	Examiner Name	A. Chang	
Total Number of Pages in This Submission	17	Attorney Docket Number	741124-79

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Form PTO-1449 and Four English Abstracts <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Other Enclosure(s)
Remarks		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 (741124-79) for the above identified docket number.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	David S. Safran, Reg. No. 27,997 Nixon Peabody LLP 401 9 <sup>th</sup> Street, N.W., Suite 900 Washington, DC 20004-2128
Signature	
Date	August 6, 2004

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]	
I hereby certify that this correspondence is being:	
<input type="checkbox"/> deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop _____, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450	
<input checked="" type="checkbox"/> transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) _____	
August 6, 2004 Date	 Signature Kathleen M. McManus Typed or printed name

# FEE TRANSMITTAL FOR FY 2004

Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 475.00

Complete if Known

Application Number 09/817,797  
Filing Date March 27, 2001  
First Named Inventor Michael HERMANN  
Examiner Name A. Chang  
Art Unit 2872  
Attorney Docket No. 741124-79

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ Note

☒ Deposit Account:

Deposit Account Number 19-2380(741124-79)

Deposit Account Name Nixon Peabody LLP

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$) 0

### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims 3 -20\*\* = 0 X Fee from below = 0  
Independent Claims 3 -3\*\* = 0 X Fee from below = 0  
Multiple Dependent X Fee from below = 0

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 0

\*\*or number previously paid, if greater. For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet
1053	130	1053	130	Non-English specification
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action
1251	110	2251	55	Extension for reply within first month
1252	420	2252	210	Extension for reply within second month
1253	950	2253	475	Extension for reply within third month
1254	1,480	2254	740	Extension for reply within fourth month
1255	2,010	2255	1,005	Extension for reply within fifth month
1401	330	2401	165	Notice of Appeal
1402	330	2402	165	Filing a brief in support of an appeal
1403	290	2403	145	Request for oral hearing
1451	1,510	1451	1,510	Petition to institute a public use proceeding
1452	110	2452	55	Petition to revive - unavoidable
1453	1,330	2453	665	Petition to revive - unintentional
1501	1,330	2501	665	Utility issue fee (or reissue)
1502	480	2502	240	Design issue fee
1503	640	2503	320	Plant issue fee
1460	130	1460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1806	180	1806	180	Submission of Information Disclosure Sum
8021	40	8021	40	Recording each patent assignment per property (times number of properties)
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))
1801	770	2801	385	Request for Continued Examination (RCE)
1802	900	1802	900	Request for expedited examination of a design application

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 475.00

## CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]

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☒ transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) 872-9306

August 6, 2004  
Date

Kathleen M. McManus  
Signature

Kathleen M. McManus

Typed or printed name

## SUBMITTED BY

Name (Print/Type)	Registration No.	Telephone
David S. Safran	27,997	(703) 827-8094
Signature	Date	August 6, 2004

NVA283028.1

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 741124-79				
<div style="display: flex; justify-content: space-between;"> <div style="width: 35%;"> <p style="margin: 0;"><b>CERTIFICATE OF MAILING</b></p> <p style="font-size: 0.8em; margin: 0;">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at (703) 872-9306, on August 6, 2004.</p> <p style="margin: 0;"><i>Kathleen M. McManus</i> Name: Kathleen M. McManus</p> </div> <div style="width: 65%;"> <p style="margin: 0;">In re Application of Michael HERMANN</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Application Number 09/817,797</td> <td style="padding: 2px;">Filed March 27, 2001</td> </tr> </table> <p style="margin: 0;">For DEVICE FOR QUANTITATIVE ASSESSMENT OF THE ALIGNED POSITION OF TWO MACHINE PARTS, WORKPIECES OR THE LIKE</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Group Art Unit 2872</td> <td style="padding: 2px;">Examiner A. Chang</td> </tr> </table> </div> </div>			Application Number 09/817,797	Filed March 27, 2001	Group Art Unit 2872	Examiner A. Chang
Application Number 09/817,797	Filed March 27, 2001					
Group Art Unit 2872	Examiner A. Chang					
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <div style="display: flex; justify-content: flex-end; align-items: flex-end; margin-top: 10px;"> <div style="text-align: right; width: 150px;"> <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$55/\$110)  <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$210/\$420)  <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$475/\$950)  <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$740/\$1480)  <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1005/\$2010)         </div> <div style="text-align: right; width: 100px;">           \$ _____            \$ _____            \$475.00            \$ _____            \$ _____         </div> </div> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is \$ _____.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-2380 (741124-79)</u>. I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor  <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.                            Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  <input checked="" type="checkbox"/> attorney or agent of record.  <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).                            Registration number if acting under 37 CFR 1.34(a) _____</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 30%;"> <p style="margin: 0;"><u>August 6, 2004</u> Date</p> </div> <div style="width: 60%; text-align: right;"> <p style="margin: 0;"><i>David S. Safran</i> _____ Signature David S. Safran _____ Typed or printed name</p> </div> </div> <p style="font-size: 0.8em; margin-top: 10px;">NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="padding: 5px;"> <input type="checkbox"/> Total of _____ forms are submitted.         </td> </tr> </table>			<input type="checkbox"/> Total of _____ forms are submitted.			
<input type="checkbox"/> Total of _____ forms are submitted.						

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231. NVA283023.1

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		<b>Docket Number (Optional)</b> 741124-79										
<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <p style="font-size: small; margin: 0;"> <b>CERTIFICATE OF MAILING</b>            I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at (703) 872-9306, on August 6, 2004.         </p> <p style="margin: 0;"> <i>Kathleen M. McManus</i>            Name: Kathleen M. McManus         </p> </div> <div style="width: 70%;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="padding: 5px;">In re Application of Michael HERMANN</td> </tr> <tr> <td style="padding: 5px;">Application Number 09/817,797</td> <td style="padding: 5px;">Filed March 27, 2001</td> </tr> <tr> <td colspan="2" style="padding: 5px;">           For DEVICE FOR QUANTITATIVE ASSESSMENT OF THE ALIGNED POSITION OF TWO MACHINE PARTS, WORKPIECES OR THE LIKE         </td> </tr> <tr> <td style="padding: 5px;">Group Art Unit 2872</td> <td style="padding: 5px;">Examiner A. Chang</td> </tr> </table> </div> </div>			In re Application of Michael HERMANN		Application Number 09/817,797	Filed March 27, 2001	For DEVICE FOR QUANTITATIVE ASSESSMENT OF THE ALIGNED POSITION OF TWO MACHINE PARTS, WORKPIECES OR THE LIKE		Group Art Unit 2872	Examiner A. Chang		
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<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$55/\$110)</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$210/\$420)</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$475/\$950)</td> <td style="text-align: right;">\$475.00</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$740/\$1480)</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1005/\$2010)</td> <td style="text-align: right;">\$ _____</td> </tr> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is \$ _____.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-2380 (741124-79)</u>.        I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <p style="margin-left: 40px;"><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.        Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p style="margin-left: 40px;"><input checked="" type="checkbox"/> attorney or agent of record.</p> <p style="margin-left: 40px;"><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).        Registration number if acting under 37 CFR 1.34(a) _____</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 30%;"> <p><u>August 6, 2004</u></p> <p>Date</p> </div> <div style="width: 60%; text-align: center;"> <p>Signature</p> <p><u>David S. Safran</u></p> <p>Typed or printed name</p> </div> </div> <p style="font-size: x-small; margin-top: 10px;">NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p>			<input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$55/\$110)	\$ _____	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$210/\$420)	\$ _____	<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$475/\$950)	\$475.00	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$740/\$1480)	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1005/\$2010)	\$ _____
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